PTO/SB/17 (07-06)
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Complete if Known Effective on 12/08/2004. pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/667,529 TRANSMITTA Filing Date September 22, 2003 For FY 2006 First Named Inventor Marc E. SURETTE **Examiner Name** Laura L. McGillem Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1636 TOTAL AMOUNT OF PAYMENT (\$) 3009-P02297US2 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: <u>04-1406</u> Deposit Account Name: DannDorfmanHerrellandSkil For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES** SEARCH FEES **Small Entity Small Entity Small Entity** Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 500 200 150 250 100 200 Design 100 100 50 130 65 200 160 Plant 100 300 80 150 Reissue 300 150 500 250 600 300 200 Provisional 100 0 0 n 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee Description Fee (\$) 50 Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) 200 100 360 180 Multiple dependent claims **Total Claims Extra Claims Multiple Dependent Claims** Fee Paid (\$) - 20 or HP = 0 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Fee Paid (\$) Indep. Claims Fee (\$) - 3 or HP = 0 0 HP = highest number of independent claims paid for, if greater than 3. **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Extra Sheets** Number of each additional 50 or fraction thereof **Total Sheets** Fee (\$) (round up to a whole number) 4. OTHER FEE(S) Fees Paid (\$)

SUBMITTED BY		/		
Signature	Patrick J. H	zzan	Registration No. (Attorney/Agent) 27,643	Telephone 215-563-4100
Name (Print/Type)	Patrick J. Hagan			Date November 1, 2006

Non-English Specification, \$130 fee (no small entity discount)
Other (e.g., late filing surcharge): Two (2) month extension fee

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

# NOV 03 2006 W

# RESPONSE UNDER 37 C.F.R. §1.116 EXPEDITED PROCEDURE

# THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

: Examiner: Laura L. McGillem

Marc E. SURETTE

: Group Art Unit: 1636

Application No. 10/667,529

: Attorney Docket No.: 3009-P02297US2

Filing Date: September 22, 2003

:

For: COMPOSITION AND METHOD FOR : TREATMENT OIF HYPERTRIGLYCERIDEMIA :

### Certificate of Mailing Under 37 C.F.R. §1.8(a):

I hereby certify that this correspondence is being deposited on November 1, 2006 with the United States Postal Service as first-class mail in an envelope properly addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Tina M. Doyle

### Petition for Extension of Time Under 37 C.F.R. §1.136(a):

The undersigned hereby petitions for an extension of time of <u>TWO (2)</u> months beyond the time period set in the last Office Action. A check in the amount of <u>\$225</u> to cover this fee is enclosed. Please charge any deficiency or credit any overpayment to Deposit Account No. 04-1406. A duplicate copy of this paper is enclosed to <u>credit</u> or debit such charging.

Patrick J. Hagan

Attorney for Applicant(s) Registration No. 27,643

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

# REQUEST FOR RECONSIDERATION UNDER 37 C.F.R. §1.116

Dear Sir:

11/03/2006 CNEGA1 00000058 10667529

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225.00 OP

Applicant respectfully requests favorable reconsideration and allowance of

claims 8-14 of this application for the reasons presented in the following remarks.